Attorney Docket No. CRED 2618

Express Mail

Label No: EV241708562

Date of Deposit: July 28, 2003

Postcard: 07/03-36

#### TRANSMITTAL OF NEW PATENT APPLICATION

Mail Stop Patent Application COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing is the patent application of:

Inventor: Arnold M. FRISCH

Filing Date:

For: SELF-CALIBRATING STROBE SIGNAL GENERATOR

ENCLOSED ARE:

- [ ] Nonpublication Request
- [x] Fee Transmittal Form (in duplicate)
- [x] 15 pages description, 8 page(s) claims, 1 page abstract
  [Total Pages: 24]
- [x] 4 sheet(s) drawings
- [x] Declaration for Patent Application
- [x] An assignment and recordation cover sheet
- [ ] Preliminary Amendment
- [ ] Information Disclosure Statement

#### PRIORITY CLAIM

Priority of			Patent/Design Application No
filed on			hereby claimed.
[ ] A	certified cop	oy of	the priority application is enclosed.
			Respectfully submitted,

Daniel Jl. Bedell Reg. No. 30,156

Customer Number 0007812 SMITH-HILL & BEDELL, P.C. 12670 N.W. Barnes Road, Suite 104 Portland, Oregon 97229

Tel. (503) 574-3100 Fax (503) 574-3197



Attorney Docket No. CRED 2618

Express Mail

Label No: EV241708562

## FEE TRANSMITTAL FORM

## CLAIMS AS FILED

	(Col. 1)	(Col. 2)	SMATIT	ENTTTY		OTHER THAN A
For:	NO. FILED	NO. EXTRA	RATE	FEE	OR	RATE
BASIC FEE	·			\$375	_OR	\$750
TOTAL CLAIMS	28 - 20 =	8	x 9 =	\$	OR	x 18 = \$144
INDEP CLAIMS	33 =	0	x 42 =	\$	OR	x 84 = \$0
[ ] MULTIPLE I	DEPENDENT CLA	IM PRESENT	+140 =	\$	OR	+280 = \$ 0
		TOTAL FILE	NG FEE	\$		\$894

(If the difference in Col. 1 is less than zero, enter "0" in Col. 2).

# Additional Fees:

	Recordat (specify)	(\$40) ————	 	

- [x] Payment is being made by check in the amount of \$934.
- [x] Please charge any additional filing fees under 37 CFR 1.16 which may be required by this paper, or credit any overpayment to Deposit Account No. 19-2560. This sheet is filed in duplicate.

Penelope Stockwell

Date